

Part B: 2001-02 Fiscal Information
Due: December 31, 2002

County and District Code

County	District	

Contact Name and Title	Telephone
Fax Number	E-mail

Calculation for Reimbursement of Costs for Opportunity Programs and Classes
(Grades 7-9 – Education Code sections 48630-48644.5)

		Whole numbers only where decimal or \$ is not provided
A. 1982-83 (P-2) ADA for Grades 7-9, inclusive, in Opportunity Classes	(A)	.
B. 1982-83 (P-2) Hours for Grades 7-9, inclusive, in Opportunity Programs	(B)	
C. 1982-83 Opportunity Programs ADA (Line B divided by 405)	(C)	.
D. Total 1982-83 Opportunity Programs and Classes ADA (Line A plus Line C; rounded to two decimal places)	(D)	.
E. 2001-02 (P-2) ADA for Grades 7-9, inclusive, in Opportunity Classes Note: Amount of ADA may not exceed amount reported on form J18/19	(E)	.
F. 2001-02 (P-2) Hours for Grades 7-9, inclusive, in Opportunity Programs	(F)	
G. 2001-02 Opportunity Programs (P-2) ADA (Line F divided by 405)	(G)	.
H. Total 2001-02 Opportunity Programs and Classes ADA (Line E plus Line G; rounded to two decimal places)	(H)	.
I. ADA in excess of 1982-83 ADA (Line H minus Line D)	(I)	.
J. Cost of Opportunity Programs and Classes related to the ADA in Line H	(J)	\$
1. 2001-02 Base Revenue Limit (Form K-12 (P-2) Line B, EDP 024)	(J-1)	\$

J. (cont.)

		Whole numbers only where decimal or \$ is not provided
2. 2001-02 Base Revenue Limit times Line H (rounded to a whole number)	(J-2)	\$
3. Deficit Factor (Form K-12 (P-2), Line E-15, EDP 086)	(J-3)	1.000
4. Revenue for Opportunity Programs and Classes (Line J-2 times Line J-3; rounded to a whole number)	(J-4)	\$
5. Total excess costs for Grades 7-9, inclusive in Opportunity Programs and Classes (Line J minus Line J-4; if less than "0", enter "0")	(J-5)	\$
6. Total excess cost per ADA (Line J-5 divided by Line H; rounded to two decimals)	(J-6)	\$
7. Maximum amount per ADA to be paid for excess costs	(J-7)	\$ 518.00
K. Total 2001-02 calculated amount of reimbursement to be received by district (Line I times the lesser of Line J-6 or Line J-7; rounded to a whole number)	(K)	\$

CERTIFICATION

I certify that the Opportunity Programs and Classes identified above have been maintained in accordance with all provisions of the *Education Code*. I have read the requirements for the establishment and maintenance of Opportunity Programs and Classes and have specifically noted the provisions outlined in subdivisions (a) and (b) of *Education Code* sections 48630-48641 and Sections 48643-48644.

Signature: _____ Date: _____
Superintendent/Designee

Please return forms not later than December 31, 2002 to:

**California Department of Education
School Fiscal Services Division
Attention: Daphne Kelley
1430 N Street, Suite 3800
Sacramento, CA 95814
Phone: (916) 324-6178
Fax: (916) 323-0196**

FORMS RECEIVED AFTER DECEMBER 31, 2002 WILL NOT BE PROCESSED UNTIL THE NEXT FISCAL YEAR APPORTIONMENT
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